## Administration for Children & Families (ACF) Office of Planning, Research & Evaluation (OPRE) National Welfare Reform Evaluation Conference – May 28 – 30, 2003 You can register online at

www.acf.hhs.gov/programs/opre/conference/index.html

## **REGISTRATION FORM**

1. Participant Information (please type or print cle	early) 2. <u>Hotel and Travel Infor</u>	<u>mation</u>	
Last Name:		BETAH is NOT responsible for making hotel or travel arrangements for non-sponsored	
First Name:		ou may make your own	
MI:	agency, AMEX Corporate 1706 (Mon Fri. between	Travel at 1-800-880-	
Job Title:	(EST)). Please complete t registration form and fax if	the enclosed hotel	
Dept:	* All mail registrations must		
Company/Organization:	* Registration by fax must b		
Mailing Address:	• ,		
City: State: Zip:			
Office Number:	* \$25.00 fee on all returned	* \$25.00 fee on all returned checks.	
Fax Number:			
Email:			
Please indicate any special needs relate limitations:	ed to physical disabilities, dietary pre	ferences, or other	
4. Payment Information	Mailing Address	DETAIL Hop Only	
Registration Fee - \$250.00	7910 Woodmont Avenue Suite 1450	BETAH Use Only	
On-site Registration day-rate only - \$100.00 per day	Bethesda, MD 20814	_ ,	
	Attn: Welfare Reform Meeting	Payment Amount:	
** Pre-approval required on ALL GOVERNM	MENT CREDIT CARDS.**		
☐ Visa ☐ MC ☐ AMEX ☐ Check made payable to BETAH – Welfare Reform Meeting		Date Entered:	
Cardholder's Name:		Entered By:	
Card Number:			
Signature:			

## **Cancellation Policy:**

Registration fees will be refunded if registration is cancelled on or before May 13, 2003. There will be NO refunds after that date.

PLEASE COMPLETE AND FAX TO BETAH ASSOCIATES, INC. CONFERENCE SERVICES AT 301-657-4259 BY April 28, 2003.